| POSITION | INITIALS | ID NO. | DATE |
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| FEE DETERMINATION | | 1117 | 10/19/01 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | H.T. | 1117 | |
| RESPONSE FORMALITY REVIEW | | | |

## INDEX OF CLAIMS

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| ✔ | Rejected | N | · | Non-elected |
| = | Allowed | I | | Interference |
| – | (Through numeral)... Canceled | A | | Appeal |
| ÷ | Restricted | O | | Objected |

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If more than 150 claims or 10 actions
staple additional sheet here

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